New Jersey Public Employment Relations Commission POLICE AND FIRE COLLECTIVE NEGOTIATIONS AGREEMENT SUMMARY FORM

Line#						
	SECTION I: Parties and Term of Contracts					
1	Public Employer: Borough of Clayton	County: Gloucester				
2	Employee Organization: Claylon Superior Officers F.O.P. Lodge No. 130	Number of Employees in Unit: 5				
3	Base Year Contract Term: Jan. 1, 2014 - Dec. 31, 2106					
4	New Contract Term: Jan. 1, 2017 - Dec. 31, 2018					
-						
	SECTION II: Type of Contract Settlement (please	e check only one)				
5	Contract settled without neutral assistance					
6	Contract settled with assistance of mediator					
7	Contract settled with assistance of fact-finder					
8	Contract settled in Interest Arbitration					
9	If contract was settled in Interest Arbitration, did the Arbit	rator issue an Award? Yes No				
	SECTION III: Base Salary Calculation					
	The "base year" refers to the final year of the expiring or ex	xpired agreement.				
	N.J.S.A. 34:13A-16.7(a) defines base salary as follows: "Base salary means the salary provided pursuant to a salary guide or table and any amount provided pursuant to a salary increment, including any amount for longevity or length of service. It shall also include any other item agreed to by the parties, or any other item that was included in the base salary as understood by the parties in the prior contract. Base salary shall not include non-salary economic issues, pension and health and medical insurance costs."					
10	Salary Costs in base year	\$ 459,657.18				
11	Longevity Costs in base year	\$ 0.00				
12	Other base year salary costs					
	Holiday Pay \$ 26,618.40					
	\$					
	\$					
	\$					
	Sum of "Other" Costs Listed in Line 12.	\$ 26,618.40				
13	Total Base Salary Cost: (sum of lines 10, 11, 12):	s 486,275.58				

SECTION IV: Increase in Base Salary Cost (for each year of New CNA)

14 Total Base Salary Cost from Line 13: \$\\ 486,275.58

	Increases	Year 1	Year 2	Year 3	Year 4	Year 5	Year 6
15	Effective Date (month/day/year)	01/01/2017	01/01/2018				
16	Cost of Salary Increments (\$)	9,193.14	9,377.01				
17	Salary Increase Above Increments (\$)	The state of the s					
18	Longevity Increase (\$)						
19	Total Increased Cost for "Other" Items (\$)	532.37	543.02			***************************************	
20	Total Increase (\$) (sum of lines 16-19)	9,725.51	9,920.02				3-10-6-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-

SECTION V: Average Increase Over Term of New CNA

21	Dollar Increase Over Life of Contract	\$ 19,645.53		[Take sum of all amounts listed on Line 20 above]
22	Percentage Increase Over Life of Contra	ct 4.04	%	[Divide amount on Line 21 by amount on Line 14]
23	Average Percentage Increase Per Year	2.02	%	[Divide percentage on Line 22 by number of years of
				the contract]

SECTION VI: Other Economic Items Outside Base Salary and Increases

←Increases →

					Z111	creases 7		
24	Item Description	Base Year Cost (\$)	Year 1	Year 2	Year 3	Year 4	Year 5	Year 6
	Shift Differential	2,400.00	2,400.00	2,400.00				
	Education	300.00	300.00	300.00				
	Uniforms Allowance	2,875.00	2,875.00	2,875.00				
	Clothing Cleaning	3,600.00	3,600.00	3,600.00			Name and a second	hammadent, abbend da halladent austrean incantence
								Material Base and Material Administration for the principle of the Commission of the
25	Totals (\$):	9,175.00	9,175.00	9,175.00				

SECTION VII: Medical Costs

	Insurance Costs	Base Year	Year 1
26	Health Plan Cost	\$ 109,687.80	\$ 110,056.20
27	Prescription Plan Cost	\$ 28,686.60	\$ 28,657.80
28	Dental Plan Cost	\$ 7,501.80	\$ 7,502.40
29	Vision Plan Cost	\$ 1,330.08	\$ 1,330.08
30	Total Cost of Insurance	\$ 147,206.28	\$ 147,546.48

Empl	oyer: Borough of Clayton	_ Employee Organization	Clayton Superior Officers F.O.P. Lodge No. 130	Page
SECT	ON VII: Medical Costs (continued)			
31	Employee Insurance Contributions	\$ 40,704.30 \$	41,866.31	
32	Contributions as % of Total Insurance Cost	27.65 % 28	3.37 %	
33	Identify any insurance changes that were	e included in this CNA.		
	SECTION VIII: Certification and Signatu	ire		
34	The undersigned certifies that the foreg	oing figures are true:		
	Print Name: Donna Nestore			
	Position/Title: CFO			
	Signature:			
	T44/20/0040	The state of the s		
	Date: [11/30/2018			
	Send this completed and signed form a	long with an electroni	ic conv of the contract and the si	anad
	certification form to: contracts@perc.s	state.nj.us	ic copy of the contract and the si	giicu
	NJ Public Employment Relations Commi	ssion		
	Conciliation and Arbitration PO Box 429			
	Trenton, NJ 08625			

Revised 8/2016

Phone: 609-292-9898

Certification

I declare to the best of my knowledge and belief that the attached document(s) are true electronic copies of the executed collective negotiations agreement(s) and the included summary is an accurate assessment of the collective bargaining agreement for the term beginning 1/1/2017 thru 12/31/2018.

Employer: Borough of Clayton

County: Gloucester

Date: 11/30/2018

Name: Donna Nestore

Print Name

Title: CFO/Asst Administrator

Signature